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APPLICANTS

Yiping Ding, City Dover, MA;  
 Kenneth W. Newman, Cambridge, MA;

\*\* CONTINUING DATA \*\*\*\*\*  
 This appln claims benefit of 60/419,175 10/17/2002 *W*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 01/09/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY MA	SHEETS DRAWING 19	TOTAL CLAIMS 47	INDEPENDENT CLAIMS 4
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ADDRESS  
 29855  
 WONG, CABELLO, LUTSCH, RUTHERFORD & BRUCCULERI,  
 P.C.  
 20333 SH 249  
 SUITE 600  
 HOUSTON , TX  
 77070

TITLE  
 System and method for statistical performance monitoring

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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